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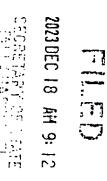
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## **COVER LETTER**

TO:

	gistration Secrision of Corp						
erio in em	NICK TEN	CZAR					
SUBJECT:		Name of Lim	ited Liability Company		-		
The enclose	d Articles of a	Amendment and fee(s) are sub	mitted for filing.				
Please returi	n all correspo	ndence concerning this matter	to the following:				
		NICHOLAS TENCZAR					
		<del></del>	Name of Person				
		NICK TENCZAR LLC					
			Firm/Company		<del></del>		
		327 E. 8TH AVE					
			Address		- ; ,	21	
		WINDERMERE, FL 3478	86		- TO	2023 DEC 18	
			City/State and Zip Code	· -	54	<u>-</u>	
		NICK10CZAR@GMAIL.C		<del></del> .	- , <del>-</del> < - ∵		:
For further i	information co	E-mail address: ( oncerning this matter, please c	to be used for future annual report notificall:	ation)	179 20 4 -1	AH 9:	
) Of Iditile!	mormation c	oncerning this matter, preuse of			121	2	
NICHOLAS TENCZAR 407 233-6224 at ()				_			
	Name of	f Person	Area Code Daytime T	elephone Numb	per		
Enclosed is	a check for th	ne following amount:					
<b>≡</b> \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	Filing Fo cate of S ed Copy nal copy is	tatus &	
Re	niling Addres	Section	Street Address: Registration Section				
	vision of C O. Box 632	orporations 7	Division of Corpo The Centre of Tal				
	llahassee. I		2415 N. Monroe		810		

Tallahassee, FL 32303



December 7, 2023

NICHOLAS TENCZAR NICK TENCZAR LLC 327 EAST 8TH AVE WINDERMERE, FL 34786

SUBJECT: NICK TENCZAR LLC Ref. Number: L23000487093

We have received your document for NICK TENCZAR LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 423A00027902

Diane Cushing Operations Manager A

www.sunbiz.org

Di tata af Camanatina D.O. DOV 0207, Tallahanna Elmida 2021

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NICK TENCZAR LLC		2023 C
(Name of the Limited Liabi	lity Company as it now appears on our records.) da Limited Liability Company)	一
The Articles of Organization for this Limited Liability Florida document number   L23000487093	·	and assigned
This amendment is submitted to amend the following:		111 10
A. If amending name, enter the new name of the lin	nited liability company here:	
NGT ENTERPRISE LLC		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	<del></del> -
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here		e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flori	ida
	City	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			□Change
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d. V. C. L.A., 1120					, ,	•
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· <u></u>	Signature of a member or au	• •	<u> </u>		<del></del>	

Filing Fee: \$25.00